

Application Data Sheet

Application Information

Application number::	Unassigned
Filing Date::	10/16/01
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R??::	
Number of CD disks::	
Number of copies of CDs::	
Sequence Submission::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	STREAMING MEDIA BITRATE SWITCHING METHODS AND APPARATUS
Attorney Docket Number::	020564-000500US
Request for Early Publication::	No
Request for Non-Publication::	Yes
Suggested Drawing Figure::	
Total Drawing Sheets::	/4
Small Entity?::	No
Latin name::	
Variety denomination name::	
Petition included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers One::	
Secrecy Order in Parent Appl.::	No

Applicant Information

Applicant Authority Type::	Inventor
----------------------------	----------

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Jason
Middle Name::
Family Name:: Lango
Name Suffix::
City of Residence:: Mountain View
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 801 Church St. #1313
City of Mailing Address:: Mountain View
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94041

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Konstantinos
Middle Name::
Family Name:: Roussos
Name Suffix::
City of Residence:: Sunnyvale
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 1063 Morse Ave. Apt. 8-103
City of Mailing Address:: Sunnyvale
State or Province of mailing address:: CA
Country of mailing address::
Postal or Zip Code of mailing address:: 94089

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name::
Family Name:: Tsai
Name Suffix::
City of Residence:: Atlanta
State or Province of Residence:: GA
Country of Residence:: US
Street of Mailing Address:: 925 Canterbury Road #813
City of Mailing Address:: Atlanta
State or Province of mailing address:: GA
Country of mailing address::
Postal or Zip Code of mailing address:: 30324

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Christopher
Middle Name::
Family Name:: Wagner
Name Suffix::
City of Residence:: Langley
State or Province of Residence:: WA
Country of Residence:: US
Street of Mailing Address:: 5120 S. Crawford Rd.
City of Mailing Address:: Langley
State or Province of mailing address:: WA
Country of mailing address::
Postal or Zip Code of mailing address:: 98260-0929

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application is	Claims Priority of	60/297,943	06/12/01

Foreign Priority Information

Country::	Application number::	Filing Date::
-----------	----------------------	---------------

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::